

26678760

ISSUE SLIP STAPLE AREA (for additional cross references)

SECTION	ALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	X		6-19-01

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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Claim	Date
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